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PATENT APPLICATION FEE DETERMINATION RECORD

Substitute for Form PTO-876

Application or Docket Number

Application or Docket Number
1075550

APPLICATION AS FILED - PART I

(Column 1)

(Column 2)

SMALL ENTITY

OR

OTHER THAN
SMALL ENTITY

FOR		NUMBER FILED	NUMBER EXTRA	RATE (\$)	FEE (\$)
BASIC FEE (37 CFR 1.18(a), (b), or (c))					
SEARCH FEE (37 CFR 1.18(k), (l), or (m))					
EXAMINATION FEE (37 CFR 1.18(o), (p), or (q))					
TOTAL CLAIMS (37 CFR 1.16(j))		minus 20 =	*	X =	
INDEPENDENT CLAIMS (37 CFR 1.16(h))		minus 3 =	*	X =	
APPLICATION SIZE FEE (37 CFR 1.16(w))		If the specification and drawings exceed 100 sheets of paper, the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).			
MULTIPLE DEPENDENT CLAIM PRESENT (37 CFR 1.16(j))					

* If the difference in column 1 is less than zero, enter "0" in column 2.

OR		RATE (\$)	FEE (\$)
X	=		
X	=		

TOTAL

* If the difference in column 1 is less than zero, enter "0" in column 2

APPLICATION AS AMENDED - PART II

(Column 1)

(Column 2)

(Column 3)

SMALL ENTITY

684

OTHER THAN
SMALL ENTITY

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA		RATE (\$)	ADDITIONAL FEE (\$)		RATE (\$)	ADDITIONAL FEE (\$)	
	Total (37 CFR 1.16(b))	*	6	Minus	**	20	=	25		JR	50	=
	Independent (37 CFR 1.16(c))	*	2	Minus	**	3	=	100		JR	200	=
	Application Size Fee (37 CFR 1.16(s))											
	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM (37 CFR 1.16(d))											
									TOTAL ADD. FEE		TOTAL ADD. FEE	

TOTAL
414 : 111

1014
1015

(Contn. 1)

(Column 2)

• *Ch. 10* •

6. 7. 8. 9.

406:

14116

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AMENDMENT B	RECEIVED		PAID		DATE (S)	ADD. TONAL FEE (S)
	CLAIMS REMAINING AFTER AMENDMENT	HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA			
Total (37 CFR 1.16(b))						
Independent (37 CFR 1.16(b)(4))						
Application Size Fee (37 CFR 1.16(f))						
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIMS (37 CFR 1.16(f)(2))						
TOTAL AMOUNT PAID						

1. 72.
4. 1. 2. 3.

14
15

* If the entry in column i is less than the entry in column j , write $i < j$ above a_{ij} .

* If the "Highest Number Previously Paid For" in THIS SPACE is less than 20, enter 20.

*** If the 'Highest Number Previously Paid For' IN THIS SPACE is less than 1, enter 1.

The "Highest Number Previously Paid For" (Total or Independent) is the highest number of days at the appropriate level of care.

This collection of information is required by 37 CFR 1.65. The information you provide will be used by the USPTO to process an application. Confidentiality is governed by 38 USC 4202(a)(1). The information you provide may be disclosed to the public, including gathering, preparing, and submitting the completed application under 37 CFR 1.65. The information you provide may also be used for other purposes on the amount of time you require to complete the form and a suggestion regarding the amount of time you require to complete the form. Please contact the Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450.

ADDRESS SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450